

**UTILITY PATENT APPLICATION TRANSMITTAL LETTER**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Docket No.  
BO 44102 ACW**To the Assistant Commissioner for Patents:**

Transmitted herewith for filing is a Continuation-in-Part patent application of:  
Serial No. 09/566,386, filed May 8, 2000, in the names of  
Amanda Johanne KILIAAN and Robert Johan Joseph HAGEMAN  
entitled: PREPARATION FOR THE PREVENTION AND/OR TREATMENT OF  
VASCULAR DISORDERS

## Enclosed are:

<input checked="" type="checkbox"/>	15 pages of specification.
<input type="checkbox"/>	sheets of formal drawings.
<input type="checkbox"/>	a newly-executed declaration of the inventor.
<input type="checkbox"/>	a copy of an executed declaration of the inventor from prior application Serial No. , filed .
<input type="checkbox"/>	incorporation by reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied as indicated in the preceding box, is considered as being part of the disclosure of the accom- panying application and is hereby incorporated by reference therein.
<input type="checkbox"/>	an assignment of the invention to , including assignment cover sheet.
<input type="checkbox"/>	Information Disclosure Statement with Form PTO-1449.
<input type="checkbox"/>	copies of the Information Disclosure Statement citations.
<input type="checkbox"/>	preliminary amendment.
<input checked="" type="checkbox"/>	return receipt postcard (MPEP 503), specifically itemized.
<input type="checkbox"/>	applicant claims small entity status under 37 CFR 1.27.
<input type="checkbox"/>	a certified copy of the Priority Document.
<input checked="" type="checkbox"/>	other: Application Data Sheet. This application is filed without a declaration.

If a CONTINUING APPLICATION, check appropriate box and supply the requisite informa-  
tion.

☐ Continuation    ☐ Divisional    ☒ Continuation-in-part (CIP)

of prior application No. 09/566,386, filed May 8, 2000.

<input checked="" type="checkbox"/>	Customer No. 000466.
<input checked="" type="checkbox"/>	Correspondence address is: YOUNG & THOMPSON, 745 South 23rd Street, Second Floor, Arlington, Virginia 22202.
<input checked="" type="checkbox"/>	Telephone: (703) 521-2297. Telefax: (703) 685-0573 or (703) 979-4709.

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(continued)

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**CLAIMS AS FILED**

	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE			\$ 710	\$ 710
TOTAL CLAIMS	18 - 20 =	0	X\$ 18	0
INDEPENDENT CLAIMS	1 - 3 =	0	X\$ 80	0
MULTIPLE DEPENDENT CLAIM PRESENT			\$ 270	


**TOTAL** \$ 710

If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here.

**SMALL ENTITY TOTAL**

\$

<input checked="" type="checkbox"/>	A check in the amount of \$710 to cover the filing fee is enclosed.
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. 25-0120 in the name of Young & Thompson, as described below. A duplicate copy of this sheet is enclosed.
<input type="checkbox"/>	Charge the amount of \$ as filing fee.
<input checked="" type="checkbox"/>	Credit any overpayment.
<input checked="" type="checkbox"/>	Charge any additional fee required under 37 CFR 1.16 and 1.17, during the pendency of this application.
<input type="checkbox"/>	Charge the issue fee set in 37 CFR 1.18 at the mailing of the Notice of Allowance.

  
Benoît Castel  
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November 2, 2000